Best Available Copy

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			32					RATE	FEE	1	RATE	FEE	
FOR			NUMBER FILED		NUMB	ER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			32 minus 20=		*	2		X\$ 9=	108.0	OR	X\$18=		
INDEPENDENT CLAIMS			U minus 3 =		*	7		X40=	40.00		X80=		
ML	ILTIPLE DEPEN	IDENT CLAIM P	RESENT						40.0	OR		<u> </u>	
* If the difference in column 1 is less than zero, enter "0" in column 2							+135=		OR	+270=			
••			·					TOTAL	503 v	OR	TOTAL		
	C	(Column 1)	MENDED - PART II (Column 2) (Column 3)					SMALL ENTITY OF			OTHER THAN R SMALL ENTITY		
7		CLAIMS REMAINING		HIGH	IEST BER			RATE	ADDI- TIONAL FEE		RATE	ADDI-	
AMENDMENT A		AFTER AMENDMENT		PREVI		PRESENT EXTRA						TIONAL FEE	
	Total	*	Minus	**		=	li	X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X40=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						 						
•								+135= TOTAL		OR	+270=		
										OR	TOTAL ADDIT. FEE		
		(Column 1)	- 2000 V - 100 V	(Colui		(Column 3)	•						
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=	1	OR	X\$18=	, <u>, , , , , , , , , , , , , , , , , , </u>	
	Independent	*	Minus	***		=	1	X40=			X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM]	7,10-		OR	7,00-		
								+135=		OR	+270=		
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	-	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		x\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=]	X40=			X80=		
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDE				CLAIM		!	7,10-		OR	7.00-		
* 1	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+270=		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."													
		mber Previously Pa iber Previously Pa					er fou	nd in the app	ropriate box	in col	lumn 1.		